Revised Manifest Summary Report

COMPOSITE MOLDING COMPANY COMPOSITE MOLDING COMPANY

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
08/14/1989		88449280		5312.48	LBS		CMP		

Total Records: 1

Default Volume: 0

Total Waste Volume: 2.6562

State of California—Health and Wellers Agency Form Approved CMS No. 2050—0039 (Expires 9-30-91)

See Instructions on Back of Page 6 and Front of Page 7

Department of Health Barrisos Totale Substances Control Division

S. Generator's Name and Malling Address	DI119191 PIB	Document No.		A 10 10 10 10 10 10 10 10 10 10 10 10 10	required b	s shèded aress y Pederal Isw.
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Designated Facility Name and Site Address CORP. OMECH CHE MICAI CORP. 12504 E WHITTER BLOOM	O. US EPA ID Numb	er	飛		Secretary and the second	
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11. US DOT Description (Including Proper Shipping Name, Hazard	Class, and ID Number)	12. Cont	Type	13. Total Quantity	Unit	
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PRIMS 5-11 NA HAZARPOUS WASTE CIQUE	1 105	101010	- 1.1	-101111	1.5	
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15. Special Handling Instructions and Additional Information			700	. 1		
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16.						The second secon
GENERATOR'S CERTIFICATION: I hereby declare that the cand are classified, packed, marked, and labeled, and are in a national government regulations. If I am a large quantity generator, I certify that I have a progration be economically practicable and that I have selected the present and future threat to human health and the environment generation and select the best waste management method the	Il respects in proper conditions in place to reduce the vol racticable method of treatment; OR, if I am a small quantit	ume and toxicity ont, storage, or by generator, I h	by highw y of was disposal ave mad	ay according to the generated to the currently available	applicable he degree le to me w fort to min	international and I have determined high minimizes the mize my waste,
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